



INVESTMENT PLAN TEMPLATE

HOUSING AND HOMELESSNESS INCENTIVE PROGRAM

September 30, 2022



El Dorado County

MCP INFORMATION

Provide the name and contact information for the MCP submitting this IP response.

MCP Name	Kaiser Permanente
Lead Contact Person Name and Title	Vanessa Davis, National Program Lead, Housing for Health Julie Bomgren, Regulatory Services Director
Contact Email Address	Vanessa.w.davis@kp.org Julie.a.bomgren@kp.org
Contact Phone	510-507-2711 626-314-0299

PART I: INVESTMENTS

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
1. PIT Count Consultant	The El Dorado Opportunity Knocks (EDOK) Continuum of Care (CoC) is looking to enhance their PIT count process. They would like to hire an objective outside vendor to help assist them but have limited funding to do so.	The EDOK CoC would like to contract with a 3 rd party vendor to do a comprehensive PIT Count in 2023 and 2025 with robust analytics. Funds will support the EDOK CoC with contracting with a PIT count vendor. Funds will be split among upcoming PIT counts.	\$10,577	EDOK CoC	1/2023 – 3/2024	1.1	Provider/ Partner Infrastructure
2. Street Outreach with Healthcare Services	Currently there are limited health care services delivered on the street. This was identified as a need by the	Funds will help support a regional rural approach to street medicine with community partners. MCP's intend	\$8,136	Street Outreach/Medicine providers	10/2022 – 10/2023	1.2, 2.1, 3.3, 3.4, 3.5, 3.6	Provider/ Partner Infrastructure

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	CoC and there is interest among health care partners to collectively address.	to engage with potential partners in designing strategies and investment opportunities.					
3. Safe Parking Program	The CoC identified in their strategic plan and in conversations with the MCPs that currently there is no low-barrier shelter or safe places for people in vehicles to park in the County. This was identified as the region's most significant gap and need.	Funds will support the implementation of a safe parking program to connect individuals and families living in vehicles. Funds will support connection to ECM and CS services. Additional investments can be made as the program continues with implementation.	\$36,611	EDOK CoC	10/2022 - 6/2024	1.2, 1.6, 2.1, 3.3, 3.4, 3.5, 3.6	Direct Member Interventions

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
4. HMIS Capacity and Infrastructure	The CoC identified in conversations with the MCPs and during their Board Meeting presentations that their current HMIS software is not meeting the CoC needs and will not be able to meet HHIP goals for alerts and robust data sharing.	Funds will be used for the EDOK CoC to procure a new HMIS software solution for the community that will meet both housing and health partner needs. The new HMIS software will be better equipped with data sharing functionality and allow for real-time alerting. The MCP's will work with the EDOK CoC to ensure HHIP needs are met during HMIS procurement process and implementation.	\$21,316	EDOK CoC	10/2022 – 9/2023	1.2, 1.4, 2.2	Provider/ Partner Infrastructure

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
5. Flexible Financial Assistance for Increased Prevention and Diversion services	The CoC identified in their strategic plan and in conversations with the MCPs that there is a significant need to support individuals and families at risk or newly entering homelessness to remain housed or exit homelessness quickly. Currently there is a program in place to provide this assistance, but funds are limited.	Funds will be incorporated into the existing community fund that is already implemented to support individuals and families with preventing homelessness or exit homelessness quickly. The MCP's are willing to add additional funds to this strategy if current funding demonstrates impact at housing MCP members.	\$4,068	Housing El Dorado/El Dorado Community Foundation	10/2022 – 9/2023	3.3, 3.4, 3.5, 3.6	Provider/ Partner Infrastructure

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
6. MCP Infrastructure	Through discussions with Kaiser Permanente staff including health plan operations, care coordination, and community health teams, the MCP identified a need for infrastructure support to work with the CoC and the County on HHIP implementation . Conversations with the CoC and other MCPs also indicated a need for better coordination and alignment across MCPs, providers and the CoC.	Funds will support MCP staff or consultant(s) to engage with the CoC, the County, Street Medicine providers, and health plan/hospital staff to implement the Local Homelessness Plan and Investment Plan. Funds will support screening, reporting, improving data sharing/HMIS, securing data sharing agreements, coordination with the CES, supporting CoC equity initiatives, helping with the PIT Count, and	\$14,963	Kaiser Permanente	10/2022 – 6/2024	1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 2.1, 2.2, 3.1, 3.2, 3.3, 3.4, 3.5, 3.6	MCP and Provider/ Partner Infrastructure

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
		collaboration to improve member housing access and housing retention.					

PART II: RISK ANALYSIS

Description of Anticipated Contingencies (500 - 1000 word limit)

To achieve the HHIP goals of preventing and ending homelessness in El Dorado County, Kaiser Permanente reviewed HHAP3 application, had discussions with the Continuum of Care and Managed Care Plan partners, conducted internet research on the community, reviewed community assessments, interviewed stakeholders (i.e., street outreach providers), and surveyed Kaiser Permanente staff to identify the following gaps/needs:

CoC Capacity: El Dorado County and Opportunity Knocks CoC have challenges with staffing bandwidth and resources considering multiple federal and state initiatives related to homelessness. Taking on new activities that require rapid start up to meet HHIP incentive measures will be difficult to achieve in the timeframe of the reporting period.

Data Integration: Data sharing, integration of member matching and alerts in the HMIS system, integrating closed loop referrals in the CES and integration of equity measures and strategies will all take significant investment of time and resources to develop. HMIS will need to be updated and additional staffing will be needed to achieve these advancements. Data sharing agreements will require legal participation and review and significant investment of staff resources. All these changes take time to integrate and implement and may be challenging to complete in the HHIP timeframe.

Street Medicine and Other Service Provider Capacity: El Dorado County currently has no street medicine programs and the county spans a diverse territory from the Sierra mountains to the outskirts of Sacramento. The county has no emergency shelter, so the homeless population is dispersed across this geography. Startup of a new program could take extensive resources and time. Effective delivery may be difficult to achieve across this broad of a region and showing impact on KP members in the HHIP reporting period may be challenging.

Workforce shortages are an issue for El Dorado County. Recruiting and training staff to implement extensive HMIS data enhancements, provide new services and supports through ECM and CS, and start new initiatives like safe parking and street medicine may be difficult. This will impact the ability of KP members to receive CalAIM services.

Limited Supply: Affordable housing is limited in El Dorado County and landlord engagement is critical to expand housing stock. Like many other rural CA counties, the community has been challenged by fires which have caused loss of affordable housing stock. Expanding housing options takes time and may not be able to be significantly impacted during the reporting period. This will impact the number of members who can be housed and retained in housing.

Rapid investment can accelerate movement related to all these challenges, but the timeline of the release of funds related to HHIP makes it difficult to utilize dollars quickly to generate results. Metrics will need to be reported before most of the incentive funds are delivered. In addition, the overall funds for rural counties like El Dorado are limited compared to more densely populated counties.

Action and Activities: Kaiser Permanente intends to take the following actions with the Investment Plan and HHIP activities to address these gaps/needs:

- Invest in El Dorado County CoC to support development of enhanced data sharing and reporting from HMIS, enhanced staffing capacity to partner and implement initiatives related to CalAIM and HHIP and share KP legal resources to

accelerate data sharing agreements and contracts.

- Invest in street outreach/medicine capacity building and work with providers to develop evidence based, effective and sustainable services. Considering regionalization of street outreach and integration of telemedicine may be an effective strategy to address workforce shortages and distance issues for El Dorado County.
- Invest in strategic housing activities with community partners that will specifically support homeless members to access housing and remain housed.
- Invest in KP staff capacity to engage with community partners to support expansion of ECM and CS and support capacity building in community providers.

PART III: CoC LETTER OF SUPPORT



September 16, 2022

To: California Department of Health Care Services
Re: Housing and Homelessness Incentive Program (HHIP) Investment Plan Letter of Support

The El Dorado Opportunity Knocks (EDOK) Continuum of Care (CoC) is supportive of the California Department of Health Care Services (DHCS) Housing and Homeless Incentive Program Investment Plan(s) (IP) being submitted by Anthem Blue Cross, California Health and Wellness, and Kaiser Permanente in El Dorado County. The EDOK CoC had the opportunity to engage and collaborate with the Managed Care Plans (MCP), provide input on the IP, and were able to review the IP prior to the MCP submission. The EDOK CoC understands that the IP reflects a non-binding general direction for investments the MCPs are willing to initially make to meet DHCS' HHIP program metrics independent of how the MCPs plan to invest HHIP incentive funds once earned. The EDOK CoC also understands that the MCPs' HHIP investments are contingent on the MCPs meeting HHIP measures over the two-year HHIP program. To this end the EDOK CoC is committed to collaborating with the MCPs as they engage locally to meet HHIP program metrics.

If you have any questions, please feel free to reach out directly

On behalf of the EDOK CoC Executive Team
Thank you,



Jennifer LaForce
EDOK Co-Chair
El Dorado Opportunity Knocks
Continuum of Care
[visit us at www.edokcoc.org](http://www.edokcoc.org)

Part IV: Attestation

See signed attestation as appendix.

**Medi-Cal Managed Care
Housing and Homelessness Incentive Program (HHIP) Investment Plan (IP)
Certification (to be completed by Health Plan CEO/CFO/COO/Authorized Executive)**

Health Plan: Kaiser Foundation Health Plan, Inc.

County: El Dorado

I certify that, to the best of my knowledge, the IP provides a true representation of the MCP's expected investment plan and strategy for achieving program measures and targets.

As a CEO, CFO, COO, or Executive duly authorized to sign on behalf of the Health Plan listed above, I am authorized or designated to make this Certification, and declare that I understand that the making of false statements or the filing of a false or fraudulent claim is punishable under state and federal law.

By: Toby Douglas
Print name

Sep 27, 2022
Date


Signature

SVP, Medicaid
Title